
SUBSTITUTE SENATE BILL 6684

State of Washington

60th Legislature

2008 Regular Session

By Senate Health & Long-Term Care (originally sponsored by Senators Shin, Berkey, Regala, Kohl-Welles, and McAuliffe)

READ FIRST TIME 02/08/08.

1 AN ACT Relating to language access services in health care; and
2 creating new sections.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 NEW SECTION. **Sec. 1.** Hundreds of thousands of patients in
5 Washington need translation and interpretation services to understand
6 medical instructions and diagnoses and to communicate clearly with
7 their doctors. For them, translation and interpretation are essential
8 to assuring that they receive the high quality health care called for
9 by the state's blue ribbon commission. The health care system in the
10 state is not currently meeting the needs of these patients, largely
11 because of unanswered questions about how to fund needed language
12 services.

13 Studies document that limited English speakers are less likely to
14 have a regular primary care provider or receive preventative care and
15 more likely to experience medical errors, all of which lead to negative
16 health outcomes and higher long-term costs to the health care system.
17 Furthermore, language barriers impede informed consent for treatment or
18 surgical procedures, leaving health care organizations and providers
19 vulnerable to potentially costly lawsuits.

1 According to the 2005 American community survey, four hundred
2 fifty-four thousand Washington residents speak English less than very
3 well. Title VI of the civil rights act of 1964 and executive orders
4 issued by President Clinton and President Bush establish the
5 requirement that health care providers who serve patients in federally
6 funded programs must provide language access services to all patients
7 with limited English proficiency. Nevertheless, most health care
8 providers lack systems and financial resources to provide these
9 services.

10 In a 2006 national survey of hospitals, forty-eight percent cited
11 cost and reimbursement concerns as a primary barrier to providing
12 language services. In Washington state, medicaid and the state
13 children's health insurance program reimburse health care providers for
14 interpreter services. Private insurers and the Washington basic health
15 plan do not. Quality language services lead to better health outcomes
16 and long-term cost savings to the health care system, and the private
17 and public sectors should share the responsibility of covering the cost
18 of these vital services.

19 NEW SECTION. **Sec. 2.** The insurance commissioner shall conduct a
20 study of language access problems encountered by consumers who purchase
21 health insurance contracts in the state of Washington. Such study
22 shall include an analysis and recommendations regarding:

23 (1) Health care problems encountered by consumers with limited
24 English proficiency;

25 (2) Barriers that language problems provide for the understanding
26 of insurance contracts, costs, and the resolution of disputes between
27 consumers and health care providers;

28 (3) The feasibility and benefit of requiring health care insurers
29 to provide for communication with limited English proficiency customers
30 in languages other than English; and

31 (4) The feasibility of instituting interpretation and translation
32 services by the office of the insurance commissioner for Washington
33 residents to help them receive consumer advice and dispute resolution
34 assistance in languages that they speak and understand. The results of
35 this analysis and associated recommendations shall be reported to the

1 governor and the legislature no later than January 1, 2009.

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